



MICHELE M. GUTMAN
Attorney at Law
(412) 394-5425

August 7, 1996

VIA FEDERAL EXPRESS

Damaris Urdaz Cristiano
Assistant Regional Counsel
Office of Regional Counsel
U.S. Environmental Protection Agency
Region II
290 Broadway
New York, NY 10007-1866

RE: SCP Carlstadt De Minimis Settlement

Dear Ms. Cristiano:

This firm represents Inland Steel Container with respect to the SCP Carlstadt Site. We have been advised that the United States has requested an explanation of any discrepancy between the Environmental Protection Agency's ("EPA") volume figures and the figures being used by the SCP Carlstadt Group. Therefore, this letter explains the difference between the number of gallons attributed to Inland Steel Container in the SCP Carlstadt data base prepared by EPA and the number of gallons attributed to Inland Steel Container in the data base prepared by the Allocator engaged by the SCP Carlstadt Group.

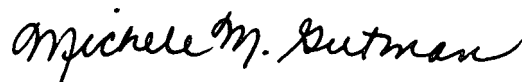
When Inland Steel Company was first advised that it might be a potentially responsible party ("PRP") with respect to the SCP Carlstadt Site due to alleged shipments from its former division, Inland Steel Container, it had no records linking that facility to the SCP Carlstadt Site. Inland subsequently received copies of three (3) manifests from EPA which indicated that there had been shipments of material from Inland Steel Container to SCP Carlstadt. The total volume reflected on those manifests was approximately 6,794 gallons. Copies of those documents are attached (Attachments 1, 2, and 3). Inland subsequently participated as a member of the SCP Carlstadt PRP Group in retaining an Allocation Consultant who located additional records with respect to the SCP Carlstadt Site. Among those records were additional documents related to additional shipments from



Damaris Urdaz Cristiano
August 7, 1996
Page 2

Inland Steel Container to SCP Carlstadt. Copies of those documents are attached (Attachments 4 and 5). In addition, there were documents related to two other shipments for which the destination was not clear. Copies of those additional documents are attached (Attachments 6 and 7). The Allocation Consultant added the volume of the additional shipments to Carlstadt and 50% of the volume of the shipments with the unclear destination to the 6,794 gallons. According to the Allocation Consultant, the resulting volume attributed to Inland Steel Container by the Allocation Consultant is 13,436 gallons. Inland cannot verify this exact figure because the "Total Quantity" on A80393 is illegible on the document which Inland was provided. However, the Allocation Consultant advised that document reflects a "Total Quantity" of 2,214 gallons. Inland believes that the figure of 13,436 gallons should be adjusted downward to account for some drums which were rejected and not accepted by SCP. However, it is Inland's understanding that there will be no adjustments to the figure derived by the Allocation Consultant for purposes of the De Minimis settlement. Therefore, for purposes of the De Minimis settlement only, Inland is willing to waive this issue. If you have any further questions regarding this issue, please contact me.

Very truly yours,

A handwritten signature in cursive script that reads "Michele M. Gutman".

Michele M. Gutman

MMG/mmg

Enclosures

cc: Elizabeth Yu, Esquire (w/encs)
Richard Puvogel (w/encs)
William T. McCormick, Esquire (w/o encs)
Sara Beth Watson, Esquire (w/o encs)

A

#1

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number 56003 Pick-Up Date 5/3/78 MO. 5 DAY 3 YR. 78
 Company Name INLAND STEEL CONTAINER CO
 Pick-Up Address 353 DANFORTH AVE JERSEY CITY N.J.
 Name of Hauler A FIORE SANITARY DISPOSAL Address REARBY, N.J.
 Name of Facility SCIENTIFIC CHEMICAL Address CARLSTADT N.J.
 Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

Handling Instructions:

FLAMMABLE LIQUID

Waste Type	Number of Containers	Physical State	Hazard ID.	Total Quantity Identify units in pounds or gallons use P for pounds and G for gallons	Pounds or Gallons	Rejected Amount
1. Acid Solution						
2. Alkaline Solution						
3. Arsenic Residues						
4. Catalyst Residues						
5. Cyanide Residues						
6. Chlorinated (Dioxin, Furan) Residues						
7. Etching, Pickling, & Plating Residue						
8. Explosive Residue						
9. Filter Clays, Filter Aids						
10. Ester, Alcohol, Ether, Ketone, Glycol Residues						
11. Heavy Metal Residue						
12. Organic and Heavy Metal Residue Mixture						
13. Latex Residue						
14. Peroxide						
15. Oil and Oil Sludges, Emulsions						
16. Paint and Pigment Residues						
17. Pesticides						
18. Pharmaceutical Wastes (Drugs, etc.)						
19. Lacramators, Amines, Mercaptans, Amide						
20. Plasticizer, Resin, Monomer, Elastomer Residues						
21. PCB, PBB Contaminated Materials						
22. Solvent, Halogenated Organic						
23. Solvent, Mixed						
24. Still Bottoms						
25. Radioactive Residue						
26. Tetraethyl Lead Residues						
Other (See Instructions)						
27. <u>PACKED-LUT</u>						
28. <u>PAINTS, SLUDGE & SOLVENTS</u>						
29.						
30.						
	44	L	F	2420	G	

SECTION V TO BE COMPLETED BY THE SPECIAL WASTE FACILITY OPERATOR

I certify that the above information is correct to the best of my knowledge.

Date 5/3/78 Signature and Title Joseph Eckert, Waste Plant Manager

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material (s) listed in Section I was collected by me. State ND Number XL246E
 Date 5/3/78 Signature Joseph Eckert Vehicle License Plate Number ND XL246E

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

Name of Hauler A FIORE SANITARY DISPOSAL Address REARBY N.J.
 I certify that the described quantity of material (s) listed in Section I was hauled by me to the Special Waste Facility named in Section I
 Date 5/3/78 Signature Joseph Eckert Vehicle License Plate Number ND XL246E

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY

Name of Facility SCP Address 216 PATERSON PLANK RD.
 Registration Number 02051A Date Waste Received 5/3/78 ☒ Accepted ☐ Rejected
 I certify that the hauler stated above delivered the waste described in Section I to this Facility.

Date 5/3/78 Signature and Title Mark Bruce Manager

A

SPECIAL WASTE MANIFEST

A 80394

10068

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number 576 C C 3 Pick-Up Date 6/28/78
Company Name INLAND STEEL CONT. CO. MO. NY DAY 28 YR. 78
Pick-Up Address 353 DANFORTH AVE. JERSEY CITY, N.J.
Name of Hauler AFFRE SANITARY DISPOSAL Address KEARNEY N.J.
Name of Facility SCIENTIFIC CHEMICAL Address CRISTADT N.J.
Handling Instructions: Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

FLAMMABLE
LIQUID

Waste Type	Number of Containers	Physical State	Hazard ID	Total Quantity Identify units in pounds or gallons use P for pounds and G for gallons	Pounds or Gallons	SECTION V TO BE COMPLETED BY THE SPECIAL WASTE FACILITY OPERATOR
						Reflected Amount
1. Acid Solution						
2. Alkaline Solution						
3. Arsenic Residues						
4. Catalyst Residues						
5. Cyanide Residues						
6. Chlorinated (Dioxin, Furan) Residues						
7. Etching, Pickling, & Plating Residue						
8. Explosive Residue						
9. Filter Clays, Filter Aids						
10. Ester, Alcohol, Ether, Ketone, Glycol Residues						
11. Heavy Metal Residue						
12. Organic and Heavy Metal Residue Mixture						
13. Latex Residue						
14. Peroxide						
15. Oil and Oil Sludges, Emulsions						
16. Paint and Pigment Residues						
17. Pesticides						
18. Pharmaceutical Wastes (Drugs, etc.)						
19. Lacrators, Ammes, Mercaptans, Amide						
20. Plasticizer, Resin, Monomer, Elastomer Residues						
21. PCB/PBB Contaminated Materials						
22. Solvent, Halogenated Organic						
23. Solvent, Mixed						
24. Still Bottoms						
25. Radioactive Residue						
26. Tetraethyl Lead Residues						
Other (See Instructions)						
27. <u>PACKED LCT</u>						
28. <u>PAINT SLUDGE</u>						
29. <u>WASTE OILS</u>						
30. <u>WASTE OILS</u>						

I certify that the above information is correct to the best of my knowledge.
Date 6/28/78 Signature and Title James M. Nixon

41 L F 22/78 1978

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material (s) listed in Section I was collected by me
Date 6/28/78 Signature James M. Nixon State NY Number NY 246 E
Vehicle License Plate Number NY 246 E

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

Name of Hauler AFFRE SANITARY DISPOSAL Address KEARNEY N.J.
I certify that the described quantity of material (s) listed in Section I was hauled by me to the Special Waste Facility named in Section I
Date 6/28/78 Signature James M. Nixon State NY Number NY 246 E
Vehicle License Plate Number NY 246 E

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY

Name of Facility SCP Address 216 Johnson Place
Registration Number 0205A Date Waste Received 6/28/78 Accepted Yes Rejected No
I certify that the hauler stated above delivered the waste described in Section I to this Facility
Date 6/28/78 Signature and Title Robert B. Lane, Jr.

SPECIAL WASTE MANIFEST

A 80395

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number 96003 Pick-Up Date 2/2/78 MO. 2 DAY 2 YR. 78
 Company Name Hyland Steel Cont. Co
 Pick-Up Address 353 R. 1000, Oak Grove, Ill.
 Name of Hauler Q. T. Smith & Sons, Inc. Address Rocky Mt. Ill.
 Name of Facility St. Louis Church Address Carleton St. Ill.
 Handling Instructions:
 Emergency Spill Phone Nos. 604-292-5560 or 609-292-7172

FLAMMABLE

LIQUID

Waste Type

- | Containers | Physical State | Hazard ID | Total Quantity | Pounds or Gallons | Reflected Amount |
|--|----------------|-----------|----------------|-------------------|------------------|
| 1. Acid Solution | | | | | |
| 2. Alkaline Solution | | | | | |
| 3. Arsenic Residues | | | | | |
| 4. Catalyst Residues | | | | | |
| 5. Cyanide Residues | | | | | |
| 6. Chlorinated (Dioxin, Furan) Residues | | | | | |
| 7. Etching, Pickling, & Plating Residue | | | | | |
| 8. Explosive Residue | | | | | |
| 9. Filter Clays, Filter Aids | | | | | |
| 10. Ester, Alcohol, Ether, Ketone, Glycol Residues | | | | | |
| 11. Heavy Metal Residue | | | | | |
| 12. Organic and Heavy Metal Residue Mixture | | | | | |
| 13. Latex Residue | | | | | |
| 14. Peroxide | | | | | |
| 15. Oil and Oil Sludges, Emulsions | | | | | |
| 16. Paint and Pigment Residues | | | | | |
| 17. Pesticides | | | | | |
| 18. Pharmaceutical Wastes (Drugs, etc.) | | | | | |
| 19. Lacrations, Amines, Mercaptans, Amide | | | | | |
| 20. Plasticizer, Resin, Monomer, Elastomer Residue | | | | | |
| 21. PCB/PBB Contaminated Materials | | | | | |
| 22. Solvent, Halogenated Organic | | | | | |
| 23. Solvent, Mixed | | | | | |
| 24. Still Bottoms | | | | | |
| 25. Radioactive Residue | | | | | |
| 26. Tetraethyl Lead Residues | | | | | |
| Other (See Instructions) | | | | | |
| 27. <u>Acidic Sol</u> | | | | | |
| 28. <u>Paint, mixed</u> | | | | | |
| 29. <u>Paints</u> | | | | | |
| 30. <u>40 L F 216 C</u> | | | | | |

I certify that the above information is correct to the best of my knowledge.
 Date 2/2/78 Signature and Title J. Smith

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material(s) listed in Section I was collected by me. State Ill. Number 604-292-5560
 Date 2/2/78 Signature James J. Morton Vehicle License Plate Number 604-292-5560

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

Name of Hauler Q. T. Smith & Sons, Inc. Address Rocky Mt. Ill.
 I certify that the described quantity of material(s) listed in Section I was hauled by me to the Special Waste Facility named in Section I.
 Date 2/2/78 Signature James J. Morton Vehicle License Plate Number 604-292-5560

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY

Name of Facility SLC Address 216 R. 1000, Oak Grove, Ill.
 Registration Number 604-292-5560 Date Waste Received 2/2/78 Accepted ✓ Rejected ✓
 I certify that the hauler stated above delivered the waste described in Section I to this Facility.

Date 2-10-78 Signature and Title Mark Baumgardner

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SPECIAL WASTE MANIFEST

A 80392

7068

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number 96003 Pick-Up Date 6/16/78
 Company Name INLAND STEEL CONTAINER CO MO. 6 DAY 16 YR. 78
 Pick-Up Address 353 DANFORTH AVE JERSEY CITY N.J.
 Name of Hauler A FIBRE SANITARY DISPOSAL Address KEARNY N.J.
 Name of Facility SCIENTIFIC CHEMICAL Address CARLSTADT N.J.
 Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

Handling Instructions:

FLAMMABLE LIQUID

Waste Type	Number of Containers	Physical State	Hazard ID.	Total Quantity Identify units in pounds or gallons use P for pounds and G for gallons	Pounds or Gallons	SECTION V TO BE COMPLETED BY THE SPECIAL WASTE FACILITY OPERATOR Rejected Amount
1. Acid Solution						
2. Alkaline Solution						
3. Arsenic Residues						
4. Catalyst Residues						
5. Cyanide Residues						
6. Chlorinated (Dioxin, Furan) Residues						
7. Etching, Pickling, & Plating Residue						
8. Explosive Residue						
9. Filter Clays, Filter Aids						
10. Ester, Alcohol, Ether, Ketone, Glycol Residues						
11. Heavy Metal Residue						
12. Organic and Heavy Metal Residue Mixture						
13. Latex Residue						
14. Peroxide						
15. Oil and Oil Sludges, Emulsions						
16. Paint and Pigment Residues						
17. Pesticides						
18. Pharmaceutical Wastes (Drugs, etc.)						
19. Lacramators, Amines, Mercaptans, Amide						
20. Plasticizer, Resin, Monomer, Elastomer Residues						
21. PCB, PBB Contaminated Materials						
22. Solvent, Halogenated Organic						
23. Solvent, Mixed						
24. Still Bottoms						
25. Radioactive Residue						
26. Tetraethyl Lead Residues						
Other (See Instructions)						
27. <u>DANGER LOT</u>						
28. <u>PAINT SLUDGE +</u>						
29. <u>SOLVENTS</u>						
30. <u>0016</u>				<u>40L F</u>	<u>2160</u>	<u>G</u>

I certify that the above information is correct to the best of my knowledge.
 Date 6/16/78 Signature and Title Thomas J. Richard Chk

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material (s) listed in Section I was collected by me.
 Date 6/16/78 Signature James M. Mather State NJ Number 3416E
 Vehicle License Plate Number NJ 3416E

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

Name of Hauler A FIBRE SANITARY DISPOSAL Address KEARNY N.J.
 I certify that the described quantity of material (s) listed in Section I was hauled by me to the Special Waste Facility
 named in Section I.
 Date 6/16/78 Signature James M. Mather Vehicle License Plate Number NJ 3416E

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY

Name of Facility S.C.P. Address 116 PARKER PARK RD.
 Registration Number 020514 Date Waste Received 06/16/78 Accepted ☒ Rejected ☐
 I certify that the hauler stated above delivered the waste described in Section I to this Facility.

Date 4-16-78 Signature and Title William B. Brown Manager

A

80393

NOT ON
SCP's report

Plant Identification Number

Pick-Up Date

6	2	7	7	8
MO.		DAY		YR.

Company Name

Pick-Up Address

Name of Hauler:

Address

Name of Facility

Address

Handling Instructions:

**Emergency Spill Phone Nos.: 609-292-3560 or
609-292-7172**

A COPY

FLYING NOTE

4. AVAILABILITY

AUG 1 1 1978

Wine Type

**SECTION V TO BE
COMPLETED BY
THE SPECIAL
WASTE FACILITY
OPERATOR**

Rejected
Amount**Total Quantity**

**Identify units in pounds or gallons
use P for pounds and G for gallons**

Pounds or Gallons

1. Acid Solution
2. Alkaline Solution
3. Arsenic Residues
4. Catalyst Residues
5. Cyanide Residues
6. Chlorinated (Dioxin, Furan) Residues
7. Etching, Pickling, & Plating Residue
8. Explosive Residue
9. Filter Clays, Filter Aids
10. Ester, Alcohol, Ether, Ketone ,
Glycol Residues
11. Heavy Metal Residue
12. Organic and Heavy Metal
Residue Mixture
13. Latex Residue
14. Peroxide
15. Oil and Oil Sludges, Emulsions
16. Paint and Pigment Residues
17. Pesticides
18. Pharmaceutical Wastes (Drugs, etc.)
19. Lacramators, Amines, Mercaptans, Amide
20. Plasticizer, Resin, Monomer,
Elastomer Residues
21. PCB,PBB Contaminated Materials
22. Solvent, Halogenated Organic
23. Solvent, Mixed
24. Still Bottoms
25. Radioactive Residue
26. Tetraethyl Lead Residues
Other (See Instructions)
27.

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28.

--	--	--	--
29.

--	--	--	--
30.

10	34		
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I certify that the above information is correct to the best of my knowledge.

Date _____ Signature and Title _____

I certify that the described quantity of material (s) listed in Section I was collected by me.

Date _____ Signature _____ Vehicle License Plate Number _____

SL20 X 2 1/2" x 1 1/2"

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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Name of Hauler	Address
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I certify that the described quantity of material (s) listed in Section I was hauled by me to

named in Section 1

Date _____ Signature _____ Vehicle License Plate Number _____

Special Waste Facilities

XGZ 24

4

[illegible]

Registration Number	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
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I certify that the hauler stated above delivered the waste described in Section I to this Facility.

... that the ~~discovered~~ ^{discovered} ~~book~~ ^{book} ~~entered~~ ^{entered} the waste basket of section 1 to this ...

	Accepted	Rejected
--	----------	----------

☐ Accepted ☐ Rejected

Facility

Study.

Date: _____ **Signature and Title**

ATTACHMENT "5"

Plant Identification Number 56808 Pick-up Date MO. DAY YR.
Company Name Shelton & Tel. Const. Co.
Pick-up Address 53 Danforth Ave Jersey City, N.J.
Name of Hauler Atkins & Sons, Inc. Address Kenner N.J.
Name of Facility Scientific Warehouse Address Carleton N.J.
Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

Handling Instructions:

FLAMMABLE
LIQUID

Waste Types

AUG 23 1976

1. Acid Solution
2. Alkaline Solution
3. Anionic Residues
4. Catalyst Residues
5. Cyanide Residues
6. Chlorinated (Dioxin, Furan) Residues
7. Etching, Pickling, & Plating Residue
8. Explosive Residue
9. Filter Clays, Filter Aids
10. Ester, Alcohol, Ether, Ketone,
Glycol Residues
11. Heavy Metal Residue
12. Organic and Heavy Metal
Residue Mixture
13. Latex Residue
14. Peroxide
15. Oil and Oil Sludges, Emulsions
16. Paint and Pigment Residues
17. Pesticides
18. Pharmaceutical Wastes (Drugs, etc.)
19. Salamators, Amines, Mercaptans, Amide
20. Plasticizer, Resin, Monomer,
Ester Residues
21. PCB, PBB Contaminated Materials
22. Solvent, Halogenated Organic
23. Solvent, Mixed
24. Soil Bottoms
25. Bioactive Residue
26. Tetraethyl Lead Residues

(Other (See Instructions))

27.				Packing List
28.				Packing Slips +
29.				Inventory
30.				

[illegible]

**SECTION V TO BE
COMPLETED BY
THE SPECIAL
WASTE FACILITY
OPERATOR**

[illegible]

~~6-Drums~~

I certify that the above information is correct to the best of my knowledge.

Da: 8/4/08

Signature and Title

the best of my knowledge.

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material (s) listed in Section I was collected by me. State Number
Date 5/4/88 Signature [Signature] Vehicle License Plate Number NJ XK2462

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

Name of Hauler A. F. Kenton / Dayton Address Reentry 978

I certify that the described quantity of material (s) listed in Section I was hauled by me to the Special Waste Facility

Name of Hauler A. F. Kenton Date 1/15/88 Signature James J. Morton Vehicle License Plate Number WJ 2K2A61A

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY.

Name of Facility SCP Address 711 Wilson Ave Newark, NJ

Registration Number 02058 Date Waste Received 05/04/78 ☒ Accepted ☐ Rejected

I certify that the hauler stated above delivered the waste described in Section I to this facility.

Date 8.4.78

Signature and Title



ATTACHMENT "6"

SECTION I TO BE COMPLETED BY THE SPECIAL WASTE GENERATOR

Plant Identification Number 96003 Pick-Up Date 8/25/78
 Company Name Island Steel Containers CO MO. DAY YR.
 Pick-Up Address 353 Broadway Ave Jersey City NJ
 Name of Hauler Atlantic Sanitary Disposal Address Highway 91
 Name of Facility Scientific Chemical Address Carlsbad, NJ
 Emergency Spill Phone Nos.: 609-292-5560 or 609-292-7172

Handling Instructions:

FLAMMABLE
LIQUID

SEP 1 1978

Waste Type

Waste Type	Number of Containers	Physical State	Hazard ID.	Total Quantity Identify units in pounds or gallons use P for pounds and G for gallons	Pounds or Gallons
1. Acid Solution					
2. Alkaline Solution					
3. Acidic Residues					
4. Catalyst Residues					
5. Cyanide Residues					
6. Chlorinated (Dioxin, Furan) Residues					
7. Etching, Pickling, & Plating Residue					
8. Explosive Residue					
9. Filter Clays, Filter Aids					
10. Ether, Alcohol, Ether, Ketone, Glycol Residues					
11. Heavy Metal Residue					
12. Organic and Heavy Metal Residue Mixture					
13. Latex Residue					
14. Peroxide					
15. Oil and Oil Sludges, Emulsions					
16. Paint and Pigment Residues					
17. Pesticides					
18. Pharmaceutical Wastes (Drugs, etc.)					
19. Isocyanates, Amines, Mercaptans, Amide					
20. Plasticizer, Resin, Monomer, Elastomer Residues					
21. PCB, PBB Contaminated Materials					
22. Solvent, Halogenated Organic					
23. Solvent, Mixed					
24. Sol Bottoms					
25. Radioactive Residue					
26. Tetraethyl Lead Residues					
27. Other (See Instructions)					
28. <u>Packed Lat</u>					
29. <u>Paint sludge +</u>					
30. <u>Solvents</u>	41	L	F	2,214	G

SECTION V TO BE COMPLETED BY THE SPECIAL WASTE FACILITY OPERATOR

Rejected Amount

I certify that the above information is correct to the best of my knowledge.

Date

8/25/78

Signature and Title

James T. Bennett

SECTION II TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material(s) listed in Section I was collected by me.

State

Number

Date

8/25/78

Signature

James T. Bennett

Vehicle License Plate Number

NJ

XZK4621

SECTION III TO BE COMPLETED BY THE SPECIAL WASTE HAULER

I certify that the described quantity of material(s) listed in Section I was hauled by me to the Special Waste Facility

Name of Hauler

Atlantic Sanitary Disposal

Address

Highway 91

Name in Section I

Date

8/25/78

Signature

James T. Bennett

Vehicle License Plate Number

NJ

XZK4621

SECTION IV TO BE COMPLETED BY THE SPECIAL WASTE FACILITY

Name of Facility

I.S.C.P.

Address

411 WILSON FWP

Registration Number

111

Date Waste Received

8/25/78

Accepted

Rejected

I certify that the hauler stated above delivered the waste described in Section I to this Facility.

Date 8/25/78

Signature and Title

James T. Bennett